

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Dr</i>	67614	3/1/00
O.I.P.E. CLASSIFIER	<i>E</i>		
FORMALITY REVIEW		71634	4/20/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	3/1/00
2	✓	✓	3/1/00
3	✓	✓	3/1/00
4	✓	✓	3/1/00
5	✓	✓	3/1/00
6	✓	✓	3/1/00
7	✓	✓	3/1/00
8	✓	✓	3/1/00
9	✓	✓	3/1/00
10	✓	✓	3/1/00
11	✓	✓	3/1/00
12	✓	✓	3/1/00
13	✓	✓	3/1/00
14	✓	✓	3/1/00
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If more than 150 claims or 10 actions
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